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7590

03/04/2004

Gary L. Loser, Esq.
 Varian Semiconductor Equipment Associates, Inc.
 35 Dory Road
 Gloucester, MA 01930



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Cheryl A. Purcell (Depositor's name)
Cheryl A. Purcell (Signature)
June 3, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/990,848	11/21/2001	Donald W. Berrian	V0077/7216WRM	2722

TITLE OF INVENTION: HYBRID SCANNING SYSTEM AND METHODS FOR ION IMPLANTATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SMITH, JOHNNIE L	2881	250-492210

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____
 2 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Varian Semiconductor Equipment Associates, Inc. Gloucester, MA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee
☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 500896 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Gary L. Loser #34,027

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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 01 FC:1501 1330.00 DA
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TRANSMIT THIS FORM WITH FEE(S)



DOCKET NO: VSEA 18-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Donald W. Berrian et al.
Serial No: 09/990,848
Confirmation No: 2772
Filed: November 21, 2001
For: HYBRID SCANNING SYSTEM AND METHODS FOR ION
IMPLANTATION
Examiner: Johnnie L. Smith
Art Unit: 2881

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being placed in the United States mail with first-class postage attached, addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the 3rd day of June, 2004.


Cheryl Purcell

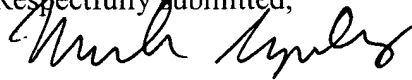
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Sir:

Transmitted herewith are: Issue Fee Transmittal, Part B; and Return Receipt Postcard.

If the enclosed papers are considered incomplete, it is respectfully requested that the undersigned attorney be contacted at 978-282-5915. All required fees may be charged to Deposit Account No. 50-0896. A duplicate of this sheet is enclosed.

Respectfully submitted,



Mark A. Superko
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978-282-5915